



2008 Open Enrollment Appeals

The annual open enrollment period provides the opportunity to make changes to your benefit choices: Enroll/Disenroll dependents, enroll or change your Medical, Dental, Vision, Voluntary Group Accident, Vacation Buy, Health Care and Day Care Reimbursement Spending Account plan elections. The 2008 Benefit Choices election period began October 20 and ended November 9, 2007 for benefit elections effective January 1, 2008.

Employee election changes *after* November 9 will only be considered due to the following: if it is determined the Sandia on-line enrollment system was in error; or that the enrollee experienced extenuating circumstance(s) (e.g., international/remote travel or medical emergency for yourself or immediate family member) to support the enrollment request *after* November 9, 2007. Failing to make your elections because you forgot or did not take the time is not considered "extenuating circumstances."

If you believe you have experienced a system issue or experienced extenuating circumstances to support an enrollment change, complete the following documentation. Requests will be reviewed by the Benefits Manager and/or 3300 Management Team.

A written determination will be sent to you by December 21, 2007.

All requests received after December 7, 2007 will not be considered under this process.

Open Enrollment Appeals Form

Date:	Employee Name:	Employee ID#:	Mail Stop#:
Question 1) Did you access the Open Enrollment system?		No <input type="checkbox"/> (go to Question 3)	Yes <input type="checkbox"/> (go to Question 2)
Question 2) What was the system enrollment problem? Describe the problem: Stop here: Fax this form to the address below by December 7, 2007 , include a copy of your final enrollment summary page printout with the fax.			
Question 3) Was the reason you failed to access the system due to extenuating circumstance(s)? No <input type="checkbox"/> <div style="text-align: center;"> Stop Here – Your request for enrollment after November 9, 2007 is denied. </div> Yes <input type="checkbox"/> (go to Question 4)			
Question 4) If you failed to access the system due to extenuating circumstance(s) describe, in detail , the reason you failed to make your annual elections. Include supporting documentation to show you were on international/remote travel or dealing with a medical emergency for yourself or an immediate family member or describe other circumstance(s). Fax or mail the form with supporting documentation to the address below by December 7, 2007 .			

HBE/Special Open Enrollment Review
Attn: Benefits Manager
Fax: 505-844-0662
Or Mail Stop 1463
Must be received by Midnight, December 7, 2007, M.S.T.